

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

10/586679

(07/20/2006)

CLAMS

	AS FILED		AFTER		AFTER	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
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50						
TOTAL IND.	1					
TOTAL DEP.	4					
TOTAL CLAIMS	5					